

MEMORANDUM

To: All Interested Parties

From: Ed Corbett, Gahanna Building & Heating Inspector

Subject: State License- HB 434

Date: September 19, 2001

As of September 17, 2001 State Licensing for contractors doing work under the Ohio Basic Building Code went into effect according to House Bill 434. These contractors will now need to provide a copy of their state license prior to being issued an electric, HVAC or plumbing permit for commercial, industrial or residential buildings larger than a three family dwelling.

The CITY OF GAHANNA per House Bill 434 will no longer be allowed to require a local license and bond for these contractors. Local certified building departments are permitted to "register" these contractors. The CITY OF GAHANNA Building Department will accordingly register OBBC contractors by having them fill out an information sheet with principal's name, address, phone number, company name, address, phone number and a copy of their state license. A fee of \$25.00 will be charged to establish and maintain this local file. No bond or insurance will be required.

For contractors doing decks, sheds and residential projects we have two options. The first is if they have a state license we can accept a copy and register them the same as OBBC contractors. The second would be if they have no state license to license them as we have for years with a \$5000 license bond, a certificate of liability and a \$25.00 fee. This will allow small contractors to continue to work and will let new guys get started.

CITY OF GAHANNA

DEPARTMENT OF BUILDING REGULATIONS

Registration for heating and air conditioning, plumbing and electrical contractor's license

Date _____

I, _____ hereby apply to the Gahanna Building

Department and agree to conform to and abide by all rules and regulations of the City of

Gahanna Building Code and the State of Ohio Building Codes.

Fee _____ Date of Registration _____

New _____ Renewal _____

Registration for Heating and Air Conditioning _____

Plumbing _____ Electrical _____

Home Improvement _____

Company Name _____ Phone # _____ Fax # _____

Corporation Name _____ Phone # _____ Fax # _____

Partnership Name _____ Phone # _____ Fax # _____

Business Address _____ City _____ State _____ Zip _____

Contractors Name _____

Address _____ City _____ State _____ Zip _____

Date of Birth _____ Phone # _____ Fax # _____